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# “Are You a Veteran?” Understanding of the Term “Veteran” among UK Ex-Service Personnel A Research Note

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## Abstract

Different countries have varying definitions of the word “veteran,” which in turn influence the benefits that ex-Service personnel receive. However, public opinion does not necessarily reflect official definitions. This article seeks to identify whether characteristics by which UK ex-Service personnel self-identify as veterans are aligned with official policy/public opinion, and which factors are associated with self-identification as a veteran. This article utilizes data from a structured telephone interview survey of UK Armed Forces personnel. All those who had left the military by the time of interview ( $n = 202$ ) were asked whether they considered themselves to be a veteran. Their responses were recorded and analyzed. Only half of the sample considered themselves to be veterans. Definitions used by UK ex-Service personnel do not align with the official UK government definition or public perceptions of “veterans,” which tend to focus on older veterans and/or those who served in both World Wars.

## Keywords

veterans, UK military, identity, ex-Service personnel

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## Introduction

The term veteran does not have a universal meaning; it can connote different things to different people, whether military personnel, national governments, or the general public.<sup>1</sup> When applied to a military population, the term is often used to describe those who have left the Armed Forces, but the specific qualifying characteristics may vary (whether the defining source is military personnel, public opinion,<sup>2</sup> or government policy<sup>3</sup>).

The official UK government definition for a veteran is the most inclusive of any country. Everyone who has performed military service for at least one day and drawn a day's pay is termed a veteran, and their dependents also qualify for certain benefits as part of the ex-Service community.<sup>4</sup> Other countries may determine veteran status on the basis of completion of a minimum period of military service (e.g., the United States) or deployment to a conflict zone (e.g., Australia).<sup>5</sup>

The ambiguities described above are sometimes avoided within UK policy-making institutions by using the term ex-Service to refer to all those who have served and subsequently left the military. The use of this alternative term for "veteran" is generally supported by public opinion. For example, a 2002 survey of over 2,000 members of the UK general public found that the most popular view of the term veterans (endorsed by 57% of respondents) referred to those who have served in either World War, compared to 37 percent who felt the term referred to all ex-Service personnel.<sup>6</sup> This research note focuses on the question of what the term veteran means to UK ex-Service personnel themselves, rather than to policy makers or the general public.

An ex-Service member's understanding of the term veteran can play a role in forming their identity after leaving the Armed Forces. To be a "veteran" is clearly a component of identity on which some individuals place great value. Some studies of self-declared veterans have identified sample members misrepresenting the extent or even existence of their service.<sup>7</sup> Identifying as a veteran also has significance in practical ways; access to state benefits and support schemes (including war pensions and priority medical treatment) is dependent on fulfilling the government definition of "veteran." If individuals do not identify themselves as veterans, despite meeting the government criteria, they may be excluding themselves from such benefits, as well as support from charities, regimental associations, and similar sources of help. Veterans' self-identities can affect their choices in daily life: for example, in the United States, veteran identity indicators (such as their rating of military experience and membership in veterans' organizations) make it more likely that veterans will use Veterans' Affairs health services over other care providers.<sup>8</sup>

Previous work in the area of veteran identity has considered the origins of official definitions of "veteran."<sup>9</sup> By contrast, literature on the self-identification of veteran status is sparse and has evolved largely in the context of access to health care by ethnic groups.<sup>10</sup> This article uses interview data from a sample of veterans within a UK Armed Forces cohort to determine to what degree they self-identify as veterans, and thus whether veteran self-identity is congruent with UK policy.

The official policy was defined in 2001. If veteran self-identity flows from official definitions, it might be expected that those who had left more recently would be more likely to self-identify as a veteran. To determine this, this research note determines which socioeconomic and military factors are associated with self-identification as a veteran, whether self-identification is associated with leaving service recently, and investigates whether factors associated with veteran self-identity as the same as qualities by which the public identify veterans.

## Methods

### *Study Sample*

This study was based on a sample drawn from Phase 1 of the King's Centre for Military Health Research (KCMHR) Military Health study of UK military personnel in service at the time of the 2003 Iraq War (Operation TELIC, the UK military code-name for the recently concluded operations in Iraq).<sup>11</sup> In total, 4,722 regular and reserve personnel who deployed on TELIC 1 (January 18, 2003 to April 28, 2003) and 5,550 regular and reserve personnel who were not deployed on TELIC 1 completed a questionnaire between June 2004 and March 2006. The response rate for the Phase 1 study was 58.7 percent. Nonresponse was associated with factors often seen in similar surveys (younger age, male sex, lower rank, coming from non-white ethnic background, Royal Navy/Royal Air Force, and being a reservist). Nonresponse was not associated with health status.<sup>12</sup>

This article uses data from a subsample of the KCMHR military health study who had consented to follow-up.<sup>13</sup> A random sample of those who scored above the threshold for common mental disorders<sup>14</sup> (12-item General Health Questionnaire [GHQ]) was selected for interview together with a random sample of the non-GHQ cases.<sup>15</sup> Also included were participants reporting symptoms of probable PTSD.<sup>16</sup> The sample was stratified by regular/reserve status (50 percent each) and deployment status (50 percent deployed on TELIC 1, 50 percent deployed elsewhere or were not deployed). In all other respects, participants were representative of the KCMHR military health study responders with regard to Service branch and demographic characteristics (age, rank, ethnicity) and in turn the main study was representative of the UK military in 2003.<sup>17</sup> The final sample size was 821 (response rate 74.2 percent). Study subjects were interviewed by telephone following a standardized schedule (which took approximately 45 min).<sup>18</sup>

This article considers those participants who had left Service at the time of interview ( $n = 202$ ). All participants met the official UK government definition of "veteran" as they had completed basic training.

### *Interview Schedule*

Participants who had left the military were asked whether they considered themselves to be a veteran as one part of a larger interview schedule.

## Statistical Analysis

Descriptive statistics and  $\chi^2$  test statistics to estimate associations between identification as a veteran and demographic and military factors were generated by tabulation with the statistical software package STATA (version 11.0).<sup>19</sup> The sociodemographic and military variables used in this analysis were generated from the self-report questionnaires that participants had previously completed as part of the underlying cohort study.<sup>20</sup>

## Results

### *“Would You Describe Yourself as a Veteran?”*

Ninety-nine percent of the sample answered the question whether they would describe themselves as a veteran ( $n = 200$  of 202), of which 104 (52.0 percent) answered “yes” (Table 1).<sup>21</sup>

In the analysis in Table 1, several factors were associated with self-identification as a veteran—being male, being less educated, serving as a full-time regular (rather than a reservist), and serving for longer. However, in a separate analysis, a logistic regression model was constructed which adjusted for the effects of covariates. This analysis showed only two factors to be independently significant: serving as a regular rather than as a reservist<sup>22</sup> and education<sup>23</sup>—those with lower educational attainment were more likely to report being a veteran.

## Discussion

This article is the first to investigate how UK military personnel who have left the Armed Forces define the word “veteran.” UK government policy defines a veteran as someone who has served at least one day in the UK Armed Forces, so by definition all participants in this study were veterans. However, only around half of those interviewed stated that they considered themselves to be a veteran, indicating that the official definition is not well used or endorsed by the veteran population. While there were few markers associated with self-identification as a veteran, those who had served as reservists were less likely to consider themselves veterans, while less educated members of the sample were more likely to self-identify as veterans.<sup>24</sup>

The official definition of “veteran” in the UK includes all who have undertaken any military service, and covers all members of the sample. There was no association between age or time since leaving and self-identification as a veteran. This implies that identity is not strongly influenced by policy. Any conclusions must be treated with caution as this is a cross-sectional study, and so does not investigate changes over time. Nonetheless it cannot be said that the official definition has succeeded in dominating personal definitions of “veteran” within the ex-Service community.

The general public primarily endorse involvement in World War 1 or 2 as the defining characteristics of a veteran. While none of the sample fell into this group,

**Table 1.** Associations between Self-Declared Veteran Status and Demographic Factors

Sociodemographic/ military variable	Number in sample <sup>a</sup> ( <i>n</i> = 200)	Number (%) who responded "yes" ( <i>n</i> = 104, 52.0%)	Pearson $\chi^2$ (degrees of freedom)	<i>p</i> value
<b>Sociodemographic</b>				
Sex			5.40 (1)	0.020
Male	174	96 (55.2%)		
Female	26	8 (30.8%)		
Marital status			5.74 (2)	0.057
Single	46	17 (37.0%)		
Married/long-term relationship	128	71 (55.5%)		
Divorced/ separated	26	16 (61.5%)		
Education			5.57 (1)	0.018
O-levels or less	63	40 (63.5%)		
A-levels or more	130	59 (45.4%)		
Age at interview (years)			6.45 (3)	0.092
<30	59	23 (39.0%)		
30–39	48	28 (58.3%)		
40–44	49	30 (61.2%)		
45+	44	23 (52.3%)		
<b>Military</b>				
Service arm			0.41 (2)	0.813
Naval Services	26	14 (53.9%)		
Army	132	70 (53.0%)		
RAF	42	20 (47.6%)		
Rank			3.80 (2)	0.150
Officer	22	9 (40.9%)		
Non-commissioned officer	82	50 (61.0%)		
Other ranks	38	18 (47.4%)		
Enlistment type			5.14 (1)	0.023
Regular	172	95 (55.2%)		
Reserve	28	9 (32.1%)		
Length of service (years)			9.00 (3)	0.029
<6	41	14 (34.2%)		
6 to <12	53	29 (54.7%)		
12 to <22	44	23 (52.3%)		
22+	59	38 (64.4%)		
Time since leaving (years)			3.42 (3)	0.332
<1	45	18 (40.0%)		
1 to <2	61	35 (57.4%)		
2 to <3	43	23 (53.5%)		

(continued)

**Table 1.** (continued)

Sociodemographic/ military variable	Number in sample <sup>a</sup> ( <i>n</i> = 200)	Number (%) who responded "yes" ( <i>n</i> = 104, 52.0%)	Pearson $\chi^2$ (degrees of freedom)	<i>p</i> value
3+	50	27 (54.0%)	0.22 (1)	0.637
Deployment—any TELIC				
TELIC deployment	118	63 (53.4%)		
None	82	41 (50.0%)	0.19 (1)	0.662
Deployed in a combat role				
Combat role	36	20 (55.6%)		
Other	163	84 (51.5%)		

<sup>a</sup>*n* = 200; does not include demographics of the two respondents not answering the question whether or not they would describe themselves as a veteran. Some may not sum to 200 due to missing data.

neither older, longer-serving veterans nor those who had deployed or seen combat were significantly more likely to self-identify as veterans, suggesting that definitions based around historical deployments are less influential among veterans.

### Limitations

This article does not deal with the question of what the term veteran does or should mean to policy makers or society at large, but is restricted to the opinions of UK veterans. The scope of this study includes only those who were in active Service in the UK Armed Forces in 2003; this makes it relevant to many modern veterans, but excludes older veterans who left before this time (as well as excluding the most recent recruits). This is also a population who are likely to have spent less time on deployment than more recent Service leavers, as many will have left before the recent military involvement in Iraq/Afghanistan.

Participants were drawn primarily from a population at risk of poor mental health<sup>14</sup>; this may have reduced the degree to which this sample is representative of the ex-military population (particularly as regards accessing medical treatment), but also provides an opportunity to study a population which may face greater than normal challenges in civilian life (although this did not have a significant effect on likelihood to self-identify as a veteran). It is also a small-scale study which did not probe deeply into participants' thoughts on the topic as free-text responses recorded were brief. A study using in-depth interview methods, preferably with a sample covering a wider range of post-Service experience, could add value in this area by delving into specific reasons for veteran definitions and by further determining how self-identification affects veteran behavior (in particular as regards access to benefits and veteran-identity behaviors such as membership of veterans' organizations).

This study involves only ex-members of the UK Armed Forces, to whom a highly inclusive official definition of veteran applies—one which, to some degree, is at odds with veterans themselves who seem to prefer more achievement-oriented deployment-related definitions. Other countries do utilize such more restrictive definitions. It would be of value to see how veteran identity varies in those countries, as well as those with other policies (such as the United States, which has veteran status primarily defined by length of service).

## Conclusions

Overall, only half of all veterans in the ex-Service group described themselves as “veterans.” Definitions salient to the general public do not seem to be aligned with those used by ex-Service personnel themselves, particularly that which defines a veteran as an elderly participant of an historical conflict.<sup>25</sup> Definitions of identity are important to the person holding them, to governments in framing policy and resource provision, and to public attitudes with respect to social inclusion/exclusion. This article demonstrates that veteran identity is not congruent between these domains.

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## Authors' Note

Christopher Dandeker and Nicola T. Fear are the joint last authors.

## Declaration of Conflicting Interests

Simon Wessely is Honorary Consultant Advisor in Psychiatry to the British Army, a trustee of Combat Stress and partially funded by the South London and Maudsley NHS Foundation Trust/Institute of Psychiatry/National Institute of Health Research Biomedical Research Centre.

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15. Cases were oversampled; 70 percent of the final study sample were GHQ cases and 30% were non-GHQ cases.
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19. Adjusted model analyses were undertaken by logistic regression, and statistical significance was defined as a  $p$  value less than .05.



20. Hotopf, "The Health of UK Military Personnel."
21. To test for any potential bias due to the fact that this is a sample drawn primarily from those with symptoms of poor mental health, a binary variable was generated comprising those qualifying as a GHQ and/or a PCL case being counted as having "any mental health diagnosis" at the time of sampling. There was no significant effect (adjusted odds ratio [OR] 1.79, 95 percent confidence intervals [0.92, 3.47]).
22. Odds ratio for reservists identifying as a veteran = 0.22, 95 percent confidence limits 0.07–0.68.
23. Odds ratio for those with O-levels or lower identifying as a veteran = 2.35, 95 percent confidence limits 1.18–4.69.
24. All those who stated that they had spent at least some time as a regular were treated as being regulars, irrespective of any service as a reserve. Consequently, for the purposes of this study, a "reservist" is one who did not claim any period of service as a regular.
25. "Inserted Questions."

## Bios

**Howard Burdett** is a PhD candidate supervised jointly by the Institute of Psychiatry and the War Studies Department of King's College London, and funded jointly by the Economic and Social Research Council and the Medical Research Council. His academic background is in biochemistry and law, and he has previously worked at the Surgeon General's Department of the Ministry of Defence; this background has led to his current work on the analysis of the mental well-being and social exclusion of ex-military personnel.

**Charlotte Woodhead** is a final year PhD student within the King's Centre for Military Health Research. Her PhD focuses on the role of women in the military and her studentship is funded by the Medical Research Council.

**Amy C. Iversen** is a senior lecturer in academic psychiatry, and has recently had a number of papers published from a clinical interview study of military personnel.

**Simon Wessely** is a psychiatrist and epidemiologist who has been researching military health matters since the 1991 Gulf War. He has published over 550 papers and obtained over £17 million in grants. He has a particular interest in the health of the Armed Forces, but also in how populations react to adversity, as well as medically unexplained syndromes.

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